

His death is a reminder that this current war on terror has affected American families and their friends every day since September 11, 2001, in Afghanistan, Iraq, and across the globe. In this case, Corporal Weaver grew up in the city of Fredericksburg, Virginia. This quiet but intelligent and energetic young man was a lifelong Boy Scout who eventually attained the rank of Eagle Scout. He was also a graduate of Virginia Tech University, where he became a Reservist for the United States Marine Corps. After serving for 6 years in the Marine Reserves, Corporal Weaver was asked to serve his country by going to Iraq. It was there, in the Al Anbar Province of Iraq, that Corporal Weaver was killed on January 26, 2005.

I do not pretend to believe that all will share the same views of our presence in Iraq, and while I am encouraged by the acts of democracy playing out over the nation's countryside this past weekend, only history can tell whether our means will inevitably lead to their intended ends. Nevertheless, while we may not all agree on the substance or rationale behind this war, we can agree that this war has had a profound effect on all Americans.

History immortalizes those whose selfless acts and deeds of bravery were made in the hopes of bringing a greater good not just for their country, but for humanity as a whole. We know them as heroes. I am proud of the service and the sacrifice made by those troops who have given their lives so that people can live in freedom. Corporal Weaver and those across the nation that we have lost may not have considered themselves to be heroes. America, however, should. And though these heroes may no longer be in this world, their families and their fellow citizens should know that they continue to live on in our minds, in our hearts, and in our prayers now and forever.

THE SMALL BUSINESS HEALTH FAIRNESS ACT OF 2005

HON. SAM JOHNSON

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, February 2, 2005

Mr. SAM JOHNSON of Texas. Mr. Speaker, I rise today to introduce the "Small Business Health Fairness Act of 2005."

Our Nation's small businesses are the backbone of our economy, and unfortunately, the cost of health care is placing an unbearable burden on many of them.

Sixty percent—over 24 million—of uninsured Americans work in small businesses. Some of these people are offered insurance and turn it down because they can't pick up their part of the tab.

This bill allows small businesses to band together to form Association Health Plans, AHPs. These AHPs will lower the cost of health care for small businesses and thereby significantly expand access to health coverage for uninsured Americans by, among other things: (1) Increasing small businesses' bargaining power with health care providers, and (2) giving employers freedom from costly state-mandated benefit packages.

Basically, the legislation puts small businesses on equal footing with large employers and unions when it comes to buying health

care. That's why AHPs will increase the number of insured Americans by up to 8 million people.

The cost-saving benefits of AHPs would help the small employers of Main Street access coverage at a more affordable price.

AHPs aren't the only solution to the number of uninsured in America, but they certainly take a large step in the right direction.

It is the least Congress can do to ensure that the American people will receive better health care at a more reasonable price.

I urge my colleagues to cosponsor this important legislation.

INTRODUCTION OF THE KEEP OUR PROMISE TO AMERICA'S MILITARY RETIREES ACT IN THE 109TH CONGRESS

HON. CHRIS VAN HOLLEN

OF MARYLAND

IN THE HOUSE OF REPRESENTATIVES

Wednesday, February 2, 2005

Mr. VAN HOLLEN. Mr. Speaker, I rise to inform my colleagues that today I have introduced the "Keep Our Promise to America's Military Retirees Act" in the 109th Congress along with Representatives CHET EDWARDS of Texas, JEFF MILLER of Florida, and DUKE CUNNINGHAM of California. This bipartisan bill addresses recent developments and offers meaningful remedies to the "broken promise" of health care for military retirees.

We have sent thousands of troops to do battle in Iraq and Afghanistan. We are creating a new generation of veterans who have been willing to make the ultimate sacrifice for our country. Our government must be accountable for the promises it makes to young men and women who are asked to serve our country in this way.

For generations, recruits for military service were promised by their own government that if they served a career of 20 years in uniform, then they and their dependants would receive health care upon retirement. But while these career soldiers put their lives on the line for our country, the government did not keep its end of the contract.

The Courts have laid to rest the question of who is responsible for making good on promises of lifetime health care that were made to young men and women who joined the service during World War II and the Korean eras. In June of 2003 the U.S. Supreme Court decided not to consider an appeal to a November 18, 2002 Federal Appeals Court ruling in a suit filed against the government of the United States on behalf of World War II and Korean era military retirees. Retired Air Force Colonel George "Bud" Day, a highly decorated Congressional Medal of Honor recipient, filed a breach of contract suit on behalf of two retired colonels who contended they had been recruited into military service as young men with the promise of lifetime health care upon retirement after serving at least 20 years in uniform.

In 1956, long after Col. Day's clients signed up for military duty, Congress enacted the first laws that defined, and began to limit, the level of health care that would be provided to military retirees. These laws, which took effect on December 7, 1956, made health care available at military facilities conditioned on space availability—in other words, military retirees

had to go to the end of the line and wait for health care. Subsequent laws removed them entirely from the military health care system when they became eligible for Medicare, resulting in a dramatic reduction in health care benefits.

The Appeals Court ruled against the plaintiffs on a technicality, arguing that promises by recruiters were invalid because only Congress could authorize military health care, which Congress had not done when the plaintiffs entered the service. But although the retired colonels lost their case on that technicality, I believe they won their moral battle on principle because the Court acknowledged the injustice of their case. As the Court said:

We cannot readily imagine more sympathetic plaintiffs than the retired officers of the World War II and Korean War era involved in this case. They served their country for at least 20 years with the understanding that when they retired they and their dependents would receive full free health care for life. The promise of such health care was made in good faith and relied upon. . . . Perhaps Congress will consider using its legal power to address the moral claims raised by Schism and Reinlie on their own behalf, and indirectly for other affected retirees.

It is ironic, Mr. Speaker, that American soldiers are fighting—and dying—for freedom in Iraq while American veterans and military retirees have to fight for health care to which they are rightfully entitled. Military retirees are understandably outraged by comments made by Dr. David Chu, Under Secretary of Defense for Personnel and Readiness, that demonstrate a callous disregard for their past service and sacrifice. In a January 25, 2005 article in the Wall Street Journal, Dr. Chu, discussing federal dollars obligated to health care for our veterans and military retirees, was quoted as saying, "The amounts have gotten to the point where they are hurtful. They are taking away from the nation's ability to defend itself."

Dr. Chu was quoted again on February 1 in an Associated Press story about proposed increases in benefits to survivors of soldiers killed in battle. This is directly from that story:

Chu said he was concerned that in recent years Congress had gone too far in expanding military retiree benefits, but he said the proposed increase in survivor benefits was well justified.

Bigger military benefits that apply mainly to retirees and their families are making it harder for the Pentagon to afford financial incentives targeted at maintaining today's military, Chu said.

"They are starting to crowd out two things: first, our ability to reward the person who is bearing the burden right now in Iraq or Afghanistan," Chu said. "(Second), we are undercutting our ability to finance the new gear that is going to make that military person successful five, ten, 15 years from now."

I do not think Dr. Chu meant to imply that it is wrong that we provide earned and promised health care benefits to our military retirees, veterans and their families; at least I hope that Dr. Chu was implying that Congress needs to address the dilemma within the federal budget where the needs of ongoing military operations and active duty personnel are forced to compete with the needs of military retirees and veterans. But the implications of Dr. Chu's words are undeniable—that keeping the promises our country made to our military veterans and retirees simply is not a priority.

Military retirees and their families, who have been misled by empty promises in the past,